
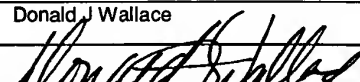


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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))		Attorney Docket No. 706715US2			
		First Inventor or Application Identifier Nick Cicone			
		Title Manifold Sensor Retention System			
		Express Mail Label No. EV026308831US as deposited on: <u>7/31/03</u>			
APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents.		ADDRESS TO: MS Patent Application Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450			
1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)		5. <input type="checkbox"/> Microfiche Computer Program (Appendix)			
2. <input checked="" type="checkbox"/> Specification [Total Pages <u>9</u>] (preferred arrangement set forth below) -Descriptive title of the invention -Cross References to Related Applications -Statement Regarding Fed Sponsored R&D -Reference to Microfiche Appendix -Background of the invention -Brief Summary of the invention -Brief Description of the Drawings (if filed) -Detailed Description -Claims(s) -Abstract of the Disclosure		6. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies			
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>7</u>]		ACCOMPANYING APPLICATION PARTS			
4. Oath or Declaration [Total Pages <u>2</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 C.F.R. § 1.63(d)(2) and 1.33 (b).		7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.37(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard MPEP 503) 13. <input type="checkbox"/> Statement (s) <input type="checkbox"/> Statement filed in prior (PTO/SB/09-12) application, Status still proper and desired 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other:			
*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).					
16. If a CONTINUING APPLICATION , Check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. _____ Prior application information: Examiner _____ FOR CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
17. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label 24938 or <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)					
Name Donald J Wallace DaimlerChrysler Intellectual Capital Corporation		 24938 PATENT TRADEMARK OFFICE			
Address CIMS 483-02-19 800 Chrysler Drive					
City	Auburn Hills	State	Michigan	Zip Code	48326-2757
Country	United States	Telephone	248-944-6522	Fax	(248) 944-6537

Name (Print or Type)	Donald J Wallace	Registration No.	43,977
Signature		Date	7/31/2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

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FEE TRANSMITTAL**For FY 2001**Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.**Complete if Known**

TOTAL AMOUNT OF PAYMENT (\$) 750		Application Number	
		Filing Date	
		First Named Inventor	Nick Cicone
		Examiner Name	
		Group / Art Unit	
		Attorney Docket No.	706715US2

METHOD OF PAYMENT (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 03-1800

Deposit Account Name DaimlerChrysler Intellectual Capital Corporation

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- 2.
- ☐
- Payment Enclosed:
-
- ☐
- Check
- ☐
- Money Order
- ☐
- Other

FEE CALCULATION

1. BASIC FILING FEE						
Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid	
1001	2001	750	375	Utility filing fee	750	
1002	2002	330	165	Design filing fee		
1003	2003	520	260	Plant filing fee		
1004	2004	750	375	Reissue filing fee		
1005	2005	160	80	Provisional filing fee		
SUBTOTAL (1)					750	

2. EXTRA CLAIM FEES

Total Claims	Extra Claim	Fee from below	Fee Paid
8	-20** = 0	X 0 = 0	0
Independent Claims	3	- 3** = 0	X 0 = 0
Multiple Dependent		280	= 0

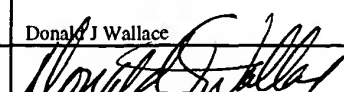
**or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
1202	2202	18	9	Claims in excess of 20
1201	2201	84	42	Independent claims in excess of 3
1203	2203	280	140	Multiple dependent claim, if not paid
1204	2204	84	42	** Reissue independent claims over original patent
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$) 0

FEE CALCULATION (continued)

3. ADDITIONAL FEES						
Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid	
105	205	130	65	Surcharge-late filing fee or oath		
127	227	50	25	Surcharge-late provisional filing fee or cover sheet		
139	239	130	130	Non-English specification		
147	247	2,520	2,520	For filing a request for examination		
112	212	920*	920*	Requesting publication of SIR prior to Examiner action		
113	213	1,840*	1,840*	Requesting publication of SIR after Examiner action		
115	215	110	55	Extension for reply within first month		
116	216	390	195	Extension for reply within second month		
117	217	890	445	Extension for reply within third month		
118	218	1,390	695	Extension for reply within fourth month		
128	228	1,890	945	Extension for reply within fifth month		
119	219	310	155	Notice of Appeal		
120	220	310	155	Filing a brief in support of an appeal		
121	221	270	135	Request for oral hearing		
138	238	1,510	1,510	Petition to institute a public use proceeding		
140	240	110	55	Petition to revive - unavoidable		
141	241	1,240	620	Petition to revive - unintentional		
142	242	1,240	620	Utility issue fee (or reissue)		
143	243	440	220	Design issue fee		
144	244	600	300	Plant issue fee		
122	222	130	130	Petitions to the Commissioner		
123	223	50	50	Petitions related to provisional applications		
126	226	180	180	Submission of Information Discl. Stmt.		
581	281	40	40	Recording of each patent assignment per property (times number of properties)		
146	246	710	355	Filing a submission after final rejection (37 CFR 1.129(a))		
149	249	710	355	For each additional invention to be examined (34 CFR 1.129(b))		
Other fee (specify) _____						
Other fee (specify) _____						
* Reduced by Basic Filing Fee Paid						
SUBTOTAL (3)					(\$) 0	

SUBMITTED BY

Typed or Printed Name	Donald J Wallace	Date	7/31/2003	Complete (if applicable)	Reg. Number	43,977
Signature				Deposit Account User ID		